## **Independent Citizens Redistricting Commission**

Application Review and Quality Control Sheet

Anni	icant Name	s Sally A	Baulch		
	Received:	2/10/10	pplicant Number:	10272	
Recommended Applicant Pool Status: Final Applicant Pool Status:					
/	ncluded	Removed	Included	Removed	
REQUIREMENTS:					
1. Was the application received before the submission deadline?				√ Yes □No	
If NO, list time/date application was received:					
2. Is the application complete?  If NO, list the item(s) that need to be completed:				☐Yes ☐No	
		I a subject recognised to the fo	allowing questions.		
3. Indicate how the applicant responded to the following questions:  A. Student enrolled in a college/university in the City of Austin?			□yes □wo		
If YES, consider I and ii only; If NO, consider I, ii, iii, and iv:					
	i. Re	side in the City of Austin?		✓Yes □No	
	ii. Re	gistered to vote in the City of Au	ıstin?	☐Yes ☐No	
	iii. Co	ntinuously registered to vote in	the City of Austin?	☐Yes ☐No	
	iv. <b>V</b> o	oted in 3 of the last 5 City of Aus	in general elections?	✓Yes □No	
<b>∻ <u>Fo</u></b>		ded related to REQUIREMENTS?  ntify issue(s) addressed and dispo		□Yes □No	

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## CONFLICTS OF INTEREST:

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4. Did the applicant respond "Yes" to any conflict of interest que If YES, indicate which question(s):	25tions:
Follow-up needed related to CONFLICTS OF INTEREST?  If YES, identify issue(s) addressed and disposition:	□Yes □No
CONSISTENCY:  5. Are applicant answers consistent?  If NO, indicate which answer(s):	☑Yes □No
Follow-up needed related to CONSISTENCY? If YES, identify issue(s) addressed and disposition:	□Yes □No
Application Reviewed By:	Review Date: 2/20/13  QC Review Date: 2/26/13
Quality Control Review By:	